

EPI Update for Friday, June 26, 2009
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- Education credits for *Chlamydia* screening
- Microcystin poisoning: a new reportable disease
- Boys seen handling and kissing a rabid bat in Florida
- Food safety and farmers' markets
- Update on Pandemic (Novel) Influenza A(H1N1)
- Meeting announcements and training opportunities

Education credits for *Chlamydia* screening

Free continuing medical education credits (CMEs) and low cost nursing continuing education units (CEUs) are being offered on *Chlamydia* screening. The one-hour sessions are provided by IDPH's sexually transmitted disease prevention program staff, and utilize the program's *Strategies for Effective Chlamydia Screening* toolkit. To schedule an educational session with free CMEs and \$10 nursing CEUs, contact Karen Thompson at kthompso@idph.state.ia.us or call 515-281-4936.

The toolkit and accompanying pocket guide include tools to reduce barriers to screening. To obtain a toolkit, go to www.idph.state.ia.us/adper/std_control.asp. The tools include:

- sexual history questionnaire examples,
- screening recommendations,
- IDPH reporting requirements and forms,
- consent guidance for working with minors,
- laboratory testing information,
- patient education materials,
- confidentiality tips,
- guidance on partner management options, and
- guidance on reimbursement of services.

Chlamydial infection, caused by *Chlamydia trachomatis*, is the most common bacterial STD in the U.S. In the last 10 years, there has been a **67 percent increase** in reported *Chlamydia* cases in Iowa. Up to 75 percent of women and 50 percent of men with *Chlamydia* are asymptomatic, leaving many cases untreated. Untreated chlamydial infection can lead to pelvic inflammatory disease (PID), ectopic pregnancy, infertility in women, urethritis in women and men, epididymitis in men, increased risk of acquiring and/or spreading HIV infection, and transmission to newborn at birth (potentially causing conjunctivitis or pneumonia in the child).

Screening all sexually active women between the ages of 15 and 25 for *Chlamydia* is recommended by the CDC, the American Academy of Family Planning Physicians (AAFP), the American College of Obstetricians and Gynecologists (ACOG), the American Medical Association (AMA), and many others. It is also a Health Care Effectiveness Data and Information Set (HEDIS) performance measurement.

Microcystin poisoning: a new reportable disease

The director of IDPH has designated suspected or confirmed cases of exposure to microcystin a reportable disease in Iowa until October 31, 2009, to study its occurrence and epidemiology in Iowa.

Diagnosis of microcystin poisoning (a toxin produced by algae) is based on symptoms and a history of exposure to a body of water. Exposure to blue-green algae can occur either by swallowing water, by having direct skin contact as when swimming or wading, or by breathing airborne droplets containing microcystins, such as during boating or waterskiing.

Symptoms of microcystin poisoning may take hours or days to show up, but normally are exhibited within one week after exposure. Microcystin may cause symptoms such as:

- stomach pain, nausea, vomiting, diarrhea, headaches and fever,
- rash, hives, or skin blisters, especially on the lips or under swimsuits,
- watery eyes and nose, cough and sore throat, pleuritic pain, wheezing, and allergic reactions, and
- liver damage evidenced by an elevated SGGT (serum gamma-glutamyl transpeptidase) after exposure to large amounts of microcystin.

Treatment of microcystin poisoning is supportive.

To report a suspected case of microcystin poisoning, call 1-800-972-2026 during regular business hours. For questions, please contact Peg Buman at 712-794-5390 or Stuart Schmitz at 515-281-8707.

Boys seen handling and kissing a rabid bat in Florida

On Monday June 15th, at the Fort Meyers Beach pier in Florida, several boys thought to be 10 to 12 years old were seen handling, playing with, and kissing a bat that later tested positive for rabies. (Health officials in Florida are trying to locate these boys.)

While this incident happened in Florida, it presents the opportunity to remind everyone that if you find a bat, it should never be handled. (Note: any bat that is on the ground, or that you can easily catch, should be considered rabid).

And just in case you were wondering, we definitely do not recommend kissing a bat, no matter what the circumstances!

Food safety and farmers' markets

Farmers' markets are becoming increasingly popular. While you enjoy the many home-grown products sold at farmers' markets, keep in mind that routine food safety measures are still needed. Recommendations include:

- purchase produce that is not bruised or damaged;
- choose fresh cut produce that are refrigerated or surrounded by ice;
- bag fresh fruits and vegetables separately from meat, poultry and seafood
- cut away any damaged or bruised areas on fresh fruits and vegetables before preparing and eating;
- wash all produce before eating
 - wash fruits and vegetables under running water just before eating, cutting or cooking even if the produce will be peeled
 - Do not wash fruits and vegetables with soap or detergent
 - Scrub firm produce, such as melons and cucumbers, with a clean produce brush; and
- dry produce with a clean cloth towel or paper towel which may further reduce bacteria that may be present.

Update on Pandemic (Novel) Influenza A(H1N1)

As of June 5th, there were more than 13,000 cases in the U.S. Fifty-seven percent have occurred in people ages 5 to 24 years. There have only been 98 cases reported in persons greater than 65 years old. Of the ill, 7.8 percent have been hospitalized with a death rate of 0.2 percent.

Right now this virus is lacking a key genetic virulence factor seen in past pandemic viruses, however mutations and re-assortments are possible. Flu surveillance this fall and winter will be essential. There is the potential for five different flu strains to circulate in the U.S. this fall - seasonal influenza A(H1N1) and A(H3N2), two influenza B strains (only one is included in this season's vaccine) and the novel influenza A(H1N1) strain. In past pandemics, the pandemic strain has become the dominant strain through the next several influenza seasons.

For Iowa specific influenza surveillance information, view this week's surveillance report at www.idph.state.ia.us/adper/iisn.asp

Meeting announcements and training opportunities

None

Have a healthy and happy week!

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